

Application Data Sheet

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: A PARTICLE BEAM GENERATOR

Attorney Docket Number:: HGF P-4002-1

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity:: No

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country:: United Kingdom
Status:: Full Capacity
Given Name:: Anthony
Middle Name:: Derek
Family Name:: Eastham
Name Suffix::
City of Residence:: Chester
State or Province of Residence:: Cheshire
Country of Residence:: United Kingdom
Street of mailing address:: 58 Vincent Drive

City of mailing address:: Chester
State or Province of mailing address:: Cheshire
Country of mailing address:: United Kingdom
Postal or Zip Code of mailing address:: CH4 7RL

Applicant Authority type::
Primary Citizenship Country::
Status::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::

City of mailing address::

State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Applicant Authority type::
Primary Citizenship Country::
Status::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::

City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 29318

Name::
Street of mailing address::

City of mailing address::
State or Province of mailing address:
Postal or Zip Code of mailing address:
Phone Number::

Fax Number::

E-Mail address::

Representative Information

Representative Customer Number:: 23399

Representative Designation::	Registration Number::	Representative Name::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/GB03/02560	6/16/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
GB	0213772.7	6/15/02	Yes

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::